		PART E	B - FEE(S)	TRA	NSMITTAL			
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STRIKER, STRIKER & STENBY 103 East Neck Road Huntington, NY 11743  /06/2006 EAYALEW2 00000054 194675 09965023					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  Michael J. Striker (Depositor's name)			
					(Depositor's name)			
FC:1501 1400.00 DA FC:1504 300.00 DA					02/21/2006 (Date)			
APPLICATION NO.	PPLICATION NO. FILING DATE FIRST NAM			INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/965,023	09/965,023 09/27/2001 Sven B					1809	2641	
TITLE OF INVENTION: METHOD AND DEVICE FOR CODING AND DECODING IMAGE SEQUENCES								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	JBLICATION FEE	TOTAL FEE(S)'DUE	DATE DUE	
nonprovisional	nonprovisional NO		\$1400		\$300	\$1700	03/02/2006	
EXAMINER		ART UNIT		CI	ASS-SUBCLASS	S-SUBCLASS		
PHILIPPE, GIMS S		2613			375-240080			
1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Robert Bosch GmbH Stuttgart, Germany								
Please check the appropriat	e assignee category or catego	ries (will not be pr	rinted on the pa	atent) :	Individual Co	orporation or other private gro	oup entity Government	
4a. The following fec(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.								
\#\					amount of the fee(s) is enclosed.  dit card. Form PTO-2038 is attached.			
Advance Order - # o	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to eposit Account Number 194675 (enclose an extra copy of this form).							
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
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